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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Deborah	
Tour run num	First name	First name
Write the name that is on your government-issued	_ L	
picture identification (for	Middle name	Middle name
example, your driver's	Rhyne	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX6933	xxx - xx-
Security number or federal Individual	OR	OR
Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	ebtor 1 Deborah First Name	L Hhyne Middle Name Last Name	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		432. W Winneconna Parkway, Apt 1  Number Street	Number Street
		Chicago Illinois 60620	
		City State Zip Code Cook	City State Zip Code
		County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
_		Oity Otate Zip Odde	Oity State Zip Gode
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have	Check one:  Over the last 180 days before filing this petition, I have
		lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor	1 Deborah	L	Rhyne		Case number (if kno	own)
	First Name	Middle Name				
Part 2	Tell the Court Abo	ut Your Bankrupt	tcy Case			
Ba are	e chapter of the nkruptcy Code you e choosing to file der		brief description of each, see B2010)). Also, go to the top o			C. § 342(b) for Individuals Filing for opriate box.
8. Ho	w you will pay the	more details a cashier's chec may pay with  I need to pay Individuals to  I request that judge may, buthe official poyou choose the	about how you may pay. Tyck, or money order. If your a credit card or check with the fee in installments. If Pay Your Filing Fee in Installments to my fee be waived (You not is not required to, waive verty line that applies to you	rpically, if you attorney is a pre-printer you choose tallments (Conay request your fee, an our family sit the Application attorney is a second to the application of the second to the application attorney is a second to the application at th	ou are paying the submitting your ed address. e this option, sig official Form 103 this option only d may do so onl ze and you are u	the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A).  If you are filing for Chapter 7. By law, a y if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official
ba	ve you filed for nkruptcy within the it 8 years?	✓ No.  Yes. District  District  District		When When When	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
ca be spo filio you pa	e any bankruptcy ses pending or ing filed by a ouse who is not ng this case with u, or by a business rtner, or by an iliate?	✓ No.  Yes. Debtor  District  Debtor  District		When When	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
	you rent your sidence?	✓ No.	landlord obtained an eviction Go to line 12.			of You (Form 101A) and file it with

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Debtor 1 Deborah Rhyne Case number (if known) First Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Deborah Rhvne Case number (if known)

#### First Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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Debtor 1 Deboran	L Mistalla Massa	Rhyne	Case number (if known)	
Part 6: Answer These Que	Middle Name estions for Reporting I	Last Name Purposes		
16. What kind of debts do you have?	16a. Are your debts   "incurred by an i   No. Go to lin   Yes. Go to lin   Too Incurred by an i   No. Go to lin   No. Go to lin   Yes. Go to lin   Yes. Go to lin	primarily consumer debts ndividual primarily for a per le 16b. ne 17. primarily business debts? liness or investment or thro le 16c.	ersonal, family, or househ The Business debts are debt Bugh the operation of the	ts that you incurred to obtain business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under expenses are No.	under Chapter 7. Go to line 13 er Chapter 7. Do you estimate paid that funds will be availat	e that after any exempt prop	perty is excluded and administrative addressed creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	<b>—</b>	5,000 10,000 -25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,00 \$500,001-\$1 milli	0	1,001-\$10 million 10,001-\$50 million 10,001-\$100 million 100,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?		0	0,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below	11	.000		
For you	correct.  If I have chosen to file of title 11, United Stat under Chapter 7.	under Chapter 7, I am awa es Code. I understand the	re that I may proceed, if e relief available under eac	he information provided is true and eligible, under Chapter 7, 11,12, or 13 th chapter, and I choose to proceed ho is not an attorney to help me fill
		ave obtained and read the		
	=	·		ode, specified in this petition.
	connection with a ban			money or property by fraud in imprisonment for up to 20 years, or
	/s/ Deborah Rhyr	ne	×	
	Signature of Debtor		Signature of D	Debtor 2
	Executed on	3/4/2018 MM / DD / YYYY	Executed or	m

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Debtor 1 Deborah	L	Rhyne	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 12	2, or 13 of title 11, Unite	nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	an inquiry that the	information in the sched	lules filed with the petition is incorrect.
attorney, you do not	· ·	. ,		•
need to file this page.	/s/ Elise Harmening		Date	8/4/2018
	Signature of Attorney f	or Debtor		MM / DD / YYYY
	,			
	Elise Harmening			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	201111001			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3124832095	Email address	eharmening@semradlaw.com
			-	
	6325657		Illinois	3
	Bar number		State	

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Fill in this information to identify your case:							
Debtor 1	Deborah	L	Rhyne				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Sankruptcy Court for the:	Northern	District of Illinois				
Case number (If known)			(State)				

Check if this is an
amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
I. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	<del>φυ.υυ</del>
1b. Copy line 62, Total personal property, from Schedule A/B	\$7,269.00
1c. Copy line 63, Total of all property on Schedule A/B	\$7,269.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Φο οο
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$1,100.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$33,534.00
Your total liabilities	\$34,634.00
art 3: Summarize Your Income and Expenses	
	\$2,523.89
. Schedule I: Your Income (Official Form 106I)	\$2,523.89

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Debt	tor 1 Deborah	L	Rhyne	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	4: Answer These Q	uestions for Administrat	ive and Statistical Records		
6. <b>A</b> ı	re you filing for bankrup	tcy under Chapters 7, 11, o	r 13?		
	No. You have nothing	to report on this part of the fo	rm. Check this box and submit th	is form to the court with your other so	hedules.
Į.	Yes.				
7. <b>W</b>	hat kind of debt do you	have?			
S			mer debts are those incurred by a fill out lines 8-10 for statistical pur	n individual primarily for a personal, poses. 28 U.S.C. § 159.	
		rimarily consumer debts. Yo with your other schedules.	u have nothing to report on this p	part of the form. Check this box and so	ubmit
		Your Current Monthly Income Form 122B Line 11; OR, Fo	e: Copy your total current monthly irm 122C-1 Line 14.	y income from Official	\$3,617.80
9.	Copy the following spec	cial categories of claims fro	m Part 4, line 6 of Schedule E/l	F:	
	From Part 4 on Schedu	le E/F, copy the following:		Total claim	
	9a. Domestic support ob	ligations (Copy line 6a.)		\$0.00	
	9b. Taxes and certain oth	er debts you owe the governr	ment. (Copy line 6b.)	\$1,100.00	
	9c. Claims for death or pe	ersonal injury while you were i	ntoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy	line 6f.)		\$0.00	
	9e. Obligations arising ou priority claims. (Copy line		r divorce that you did not report a	\$0.00	
	9f. Debts to pension or p	rofit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00	

\$1,100.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this	information to identify your c	case:					
Debtor 1	Deborah	L		Rhyne			
Debtor 2	First Name	Middle N	lame	Last Name			
(Spouse, if fil	First Name	Middle N	lame	Last Name			
United Sta	tes Bankruptcy Court for the:	Northern		District of Illinois			
Case num (If known)	ber			(State)			
Officia	I Form 106A/B				1		Check if this is an amended filing
Sched	dule A/B: Prope	erty					12/1
category v responsibl write your Part 1:	where you think it fits best. e for supplying correct infor name and case number (if I Describe Each Residend	Be as complete a rmation. If more sp known). Answer ev ce, Building, Lar	nd accu pace is very que nd, or (	Other Real Estate You Own or	ople are o this fo Have a	e filing together, both a rm. On the top of any a an Interest In	re equally
1. Do you	own or have any legal or early No. Go to Part 2	quitable interest i	in any re	esidence, building, land, or similar	propert	y?	
	Yes. Where is the property?						
1.1	Street address, if available, or	other description	Sir	is the property? Check all that apply.  ngle-family home  uplex or multi-unit building		the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.
			G Co	ondominium or cooperative anufactured or mobile home and		Current value of the entire property?	Current value of the portion you own?
	Number Street  City State	Zip Code	In	vestment property meshare iher		Describe the nature o interest (such as fee s the entireties, or a life	imple, tenancy by
			one.  De	ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only least one of the debtors and another	eck	Check if this is co (see instructions)	mmunity property
			ш	information you wish to add about	this ite	m, such as local	
.,			prope	rty identification number:			
1.2	Street address, if available, or		Sir Du Co	is the property? Check all that apply.  ngle-family home  uplex or multi-unit building  ondominium or cooperative  anufactured or mobile home		the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> <i>ims Secured by Property.</i> Current value of the portion you own?
	Number Street			and		Describe the nature o	f your ownership
	City State	Zip Code	HŢir	vestment property meshare ther		interest (such as fee s the entireties, or a life	imple, tenancy by
			one.  De De De Other	has an interest in the property? Che better 1 only better 2 only better 1 and Debter 2 only least one of the debters and another information you wish to add about rty identification number:		(see instructions)	mmunity property

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First Name	Middle Name	Last Name		
eet address, if available, or c	ther description	Single-family home Duplex or multi-unit building	apply. Do not deduct secured claims or exemptions. Puthe amount of any secured claims on Schedule and Creditors Who Have Claims Secured by Property  Current value of the Current value of the	D:
mber Street		Manufactured or mobile home	entire property? portion you own?  ———————————————————————————————————	
/ State	Zip Code	Timeshare Other	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	
		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano	other	
			about this item, such as local	
ave attached for Part 1. W	rite that number	•	uding any entries for pages	
wn, lease, or have legal of that someone else drives. If ans, trucks, tractors, sport to	r equitable intere you lease a vehicle	, also report it on Schedule G: Executory	•	
Model: Year:		Who has an interest in the propone.  Debtor 1 only	perty? Check  Do not deduct secured claims or exemptions. P the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property	D:
Other information:		│ <b>└</b>		
		instructions)	property (see	
Model: Year:		Who has an interest in the propone.  Debtor 1 only	perty? Check  Do not deduct secured claims or exemptions. P the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property	D:
Other information:		Check if this is community p		
	State  Describe Your Vehicle  Who, lease, or have legal of that someone else drives. If ans, trucks, tractors, sport under the state of the state o	Describe Your Vehicles  Why lease, or have legal or equitable interestant someone else drives. If you lease a vehicle ans, trucks, tractors, sport utility vehicles, motors  Make Model: Year: Approximate mileage:  Make Model: Year: Approximate mileage:	Single-family home   Duplex or multi-unit building   Condominium or cooperative   Manufactured or mobile home   Land   Investment property   Timeshare Other   Other information:   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor 6 only   Debtor 8 only   Debtor 9 only   Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 6 only   Debtor 8 only   Debtor 9 only   Debtor 1 only   Debtor 9 only   Debtor 9 only   Debtor 1 only   Debtor 9 only   Debtor 1 only   Debtor 9	set address, if available, or other description    Single-family home

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	Deborah First Name	L Middle Name	Rhyne Last Name	Case number	er (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communications)	nly rs and another	the amount of any secu	claims or exemptions. Put tred claims on <i>Schedule D:</i> nims Secured by Property.  Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on		the amount of any secu	claims or exemptions. Put tred claims on <i>Schedule D:</i> nims Secured by Property. Current value of the portion you own?
			At least one of the debtor Check if this is commu			
	mples: Boats, trailers, motors	•	instructions) er recreational vehicles, other fishing vessels, snowmobiles,	•		
Exar	nples: Boats, trailers, motor No Yes	•	er recreational vehicles, other	motorcycle accessori property? Check  hly s and another	Do not deduct secured the amount of any secu	claims or exemptions. Put tred claims on <i>Schedule D:</i> nims Secured by Property.  Current value of the portion you own?

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D	ebtor 1	Deborah First Name	L Middle Name	Rhyne Last Name	Case number (if known)	
Pa	art 3:	Describe Y	our Personal and Household I	Items		
D	o you	own or have	e any legal or equitable intere	est in any of the following	ng items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Examp	-	and furnishings liances, furniture, linens, china, kitche	enware		
	No Yes. D	Describe				
	<b>7. Elect</b> Examp No		s and radios; audio, video, stereo, an	d digital equipment; compu	ters, printers, scanners; music	
<u>✓</u>		Describe	TV (2), laptop, cell phone (2), blueto	oth speaker		\$500.00
			ue und figurines; paintings, prints, or oth in, or baseball card collections; other			
<b>✓</b>	No Yes. D	Describe				
		les: Sports, ph	rts and hobbies otographic, exercise, and other hobb s; carpentry tools; musical instrumen		tables, golf clubs, skis; canoes	
<b>✓</b>	No Yes. [	Describe	, , , , , , , , , , , , , , , , , , , ,			
	I <b>0. Fire</b> Examp		es, shotguns, ammunition, and relate	ed equipment		
<b>✓</b>	No					
	Yes. D	Describe				
			clothes, furs, leather coats, designer v	wear, shoes, accessories		
Щ	No Voc F	) ocoribo	Lland Olathia			1
✓	Tes. L	Describe	Used Clothing			\$300.00
	I <b>2. Jew</b> Examp		ewelry, costume jewelry, engagemen r	t rings, wedding rings, heirld	oom jewelry, watches, gems,	
<u>✓</u>		Describe	Costume Jewelry			\$150.00
	Examp	-farm animals les: Dogs, cats	s, birds, horses			1
<b>✓</b>	No Yes. D	Describe				
1	_	other person	al and household items you did no	ot already list, including a	ny health aids you did not list	
✓	No	N				1
П	Yes. D	Describe				
			lue of all of your entries from Part		or pages you have attached	\$950.00

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Debtor 1 Deborah Rhyne Case number (if known) First Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Credit Union One 17.1. Checking account: \$40.00 17.2. Checking account: 17.3. Savings account: \$269.00 Credit Union One 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Green Dot - Prepaid Debit \$110.00 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Debt	tor 1 Deborah	L	Rhyne	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments i	orate bonds and other negotiab include personal checks, cashiers' ents are those you cannot transfer	checks, promissory note	es, and money orders.	
	Yes. Give specific information about them	Issuer name:			
21.			, thrift savings accounts,	or other pension or profit-sharing plans	
	No ✓ Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:	401k through John Ha	ncock	\$5000.00
	,	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, public			
	✓ Yes	Electric:			
	_	Gas:			
		Heating oil:			
		Security deposit on rental unit:	Landlord		\$900.00
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	_	or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No  Yes	Issuer name and description:			
					-
		_			

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Debt	First Name	L Mide	dle Name	Last Name	Case number (if known)	
24.	Interests in a		ccount in a qu		nder a qualified state tuition program.	
	✓ No  Yes	. , , , , , , , , , , , , , , , , , , ,	, , , ,	tely file the records of any int	erests.11 U.S.C. § 521(c):	
25	Trusto oquit	able or future interests i	n nronorty (oth	or then emothing listed in	ing 1) and rights or namers	
25.	exercisable f	or your benefit	ii property (oth	ier than anything histed in	ine 1), and rights or powers	
	Yes. Desc	ribe				
26.				d other intellectual proper from royalties and licensing a		
	No Yes. Desc	ribe Co-Author: Wom	nen Riding Fearl	essly Vol. II		
0.7	Unknown	nahinan and ather mana	val intermibles			
27.		nchises, and other gene ilding permits, exclusive lic	_		or licenses, professional licenses	
	✓ No  Yes. Desc	ribe				
Mor	ney or propei	ty owed to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds or	wed to you				
		specific information			Federal:	\$0.00
	you a	t them, including whether already filed the returns the tax years			State:	\$0.00
20	Family suppor	-			Local:	\$0.00
۷.	Examples: Past		y, spousal supp	ort, child support, maintena	ce, divorce settlement, property settlemer	t
	<b>√</b> No					
		specific information			Alimony:	\$0.00
		specific information			Alimony:  Maintenance:	\$0.00 \$0.00
		specific information			,	
		specific information			Maintenance:	\$0.00
30	Yes. Give				Maintenance: Support:	\$0.00 \$0.00
30.	Yes. Give s  Other amount  Examples: Unp	s someone owes you			Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00
30.	Yes. Give s  Other amount  Examples: Unp	s someone owes you aid wages, disability insur ial Security benefits; unpai			Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00

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Deb	tor 1 Deborah	<u>L</u>	Rhyne	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life in	nsurance; health savings	s account (HSA); credit, h	omeowner's, or renter's insurance	
	No  ✓ Yes. Name the insurance comp	Company	y name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value.	•	through employer		\$0.00
					-
32.	Any interest in property that is d If you are the beneficiary of a living property because someone has died	trust, expect proceeds f		, or are currently entitled to receive	
	<b>✓</b> No				
	Yes. Describe				
33.	Claims against third parties, whe			a demand for payment	
	Examples: Accidents, employment of No	disputes, insurance ciair	ns, or ngms to sue		
	Yes. Describe				
34.	Other contingent and unliquidate to set off claims	ed claims of every nat	ure, including counterc	laims of the debtor and rights	
	<b>✓</b> No				
	Yes. Describe				
0.5	A. 6				
35.	Any financial assets you did not a	aiready list			
	Yes. Describe				
36.	Add the dollar value of all of your	•	• .		\$6319.00
	ior Part 4. Write that number her	·e			
Part	5: Describe Any Business-R	elated Property Yo	ou Own or Have an In	terest In. List any real estate in Par	t 1.
	Do you own or have any legal or				
	No. Go to Part 6.				Current value of the portion you own?
	Yes. Go to line 38.			i	Do not deduct secured claims or exemptions
38.	Accounts receivable or commiss	ions you already earn	ed		o. stomptions
	✓ No				
	Yes. Describe				
30	Office equipment furnishings or	nd supplies			
39.	Office equipment, furnishings, ar Examples: Business-related computer		, printers, copiers, fax ma	chines, rugs, telephones, desks, chairs, elec	tronic devices
	<b>✓</b> No				
	Yes. Describe				

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Deb	tor 1 Deborah	L	Rhyne	Case number (if known)	
ı	First Name	Middle Name	Last Name		
40.	Machinery, fixtures, e	equipment, supplies you us	e in business, and tools of your trad	е	
	<b>✓</b> No				
	Yes. Describe				
41.	Inventory				
	<b>✓</b> No				
	Yes. Describe				
42.	Interests in partnersh	nips or joint ventures			
	✓ No				
	<b>=</b>	Na	ame of entity:	% of ownership:	
	Yes. Give specific information about				
	them	_			
		_			<u> </u>
43 (	Customer lists mailing	up lists, or other compilation	is .	<del>-</del>	<del></del>
10.		, noto, or other complication			
	<b>✓</b> No				
	Yes. Do your lists	include personally identifiable	information (as defined in 11 U.S.C. §	101(41A))?	
	☐ No				
		oribo			
	Tes. Desc	cribe			
44.	Any business-related	property you did not alrea	dv list		
		property you are not allou	<b>-,</b>		
	<b>✓</b> No	_			
	Yes. Give specific				
	information	_			<del></del>
		_			<u> </u>
		<del>-</del>			
		_			
		_			
45 A	dd the dollar value of	all of your entries from Par	t 5, including any entries for pages y	vou have attached	
			pages		
<u> </u>					
Part	<sub>16:</sub> Describe Any F	arm- and Commercial	Fishing-Related Property You C	Own or Have an Interest In.	
	If you own or have a	n interest in farmland, list it in P	rart 1.		
46.	Do you own or have a	any legal or equitable inter	est in any farm- or commercial fishi	ng-related property?	
	No. Go to Part 7.				Current value of the
	Yes. Go to line 47				portion you own?
	163. 40 to line 47	•			Do not deduct secured claims or exemptions
47	Farm animals				
''.	Examples: Livestock, p	oultry, farm-raised fish			
	No No Dooriba				
	Yes. Describe				

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Deb	or 1 Deboran	L Mistalla Nama	Rhyne	Case number (if known)	
	First Name	Middle Name	Last Name		
48.	Crops-either growing or	harvested			
	No No				
	_				
	Yes. Describe				
	_	<del></del>		_	
49.	Farm and fishing equipment	nent, implements, machinery,	fixtures, and tools of trac	le	
	<b>✓</b> No				
	Yes. Describe				
	Tes. Describe				
50	Farm and fishing supplie	as abomicals and food			
50.	railii aliu lisiiliig supplie	es, chemicais, and leed			
	<b>✓</b> No				
	Yes. Describe				
51.	Any farm- and commerc	ial fishing-related property you	u did not already list		
	□ Na				
	✓ No				
	Yes. Describe				
52 A	dd the dollar value of all	of your entries from Part 6, inc	luding any entries for na	ges you have attached	
		nere			
Part	7: Describe All Prop	erty You Own or Have an I	nterest in That You Di	id Not List Above	
53.		erty of any kind you did not alre	eady list?		
	Examples: Season tickets,	country club membership			
	✓ No				
	Yes. Give specific				
	information				
	L				
54. A	dd the dollar value of all	of vour entries from Part 7. Wr	ite that number here		▶
		•			
Part	8: List the Totals of I	Each Part of this Form			
55. I	Part 1: Total real estate,	line 2			
56. [	oart 2 total vehicles, line	5		<u></u>	
57. <b>F</b>	art 3: Total personal and	household items, line 15	Φ050.00		
	•	·	\$950.00	<u></u>	
58. <b>F</b>	art 4: Total financial ass	ets, line 36	\$6319.00		
E0 '	Part 5: Total business-rel	ated property line 45			
:19		atou proporty, mio 10			
39.1					
		shing-related property, line 52			
60. I	Part 6: Total farm- and fis			<del></del>	
60. I				<u> </u>	
60. I	Part 6: Total farm- and fis		\$7260.00	<u> </u>	± \$7260 00
60. I	Part 6: Total farm- and fis	rty not listed, line 54	\$7269.00	Copy personal property total ►	+ \$7269.00
60. I	Part 6: Total farm- and fis	rty not listed, line 54	\$7269.00	Copy personal property total ►	+ \$7269.00
60. I	Part 6: Total farm- and fis	rty not listed, line 54	\$7269.00	Copy personal property total	+ \$7269.00 \$7269.00

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Fill	in this inforn	nation to identify your cas	se:			
			· ·	Dlaves		
Dec	otor 1	Deborah First Name	Middle Name	Rhyne Last Name		
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name		
I Inch	tad Otataa D					
Uni	ted States Ba	ankruptcy Court for the:	Northern D	vistrict of Illinois (State)		
	se number lown)			(		
Of	ficial I	Form 106C				Check if this is an amended filing
Sc	hedule	C: The Prope	erty You Claim a	s Exempt		04/16
add For stat the tax- und you	each item te a specifiamount of exempt re ter a law the r exemption the treatment of the tr	es, write your name and of property you clair to dollar amount as est any applicable statustirement funds—may nat limits the exemption would be limited to of exemptions are you or e claiming state and feet and	nd case number (if known as exempt, you must seempt. Alternatively, you tory limit. Some exempt by be unlimited in dollar a on to a particular dollar to the applicable statutor	specify the amount of the may claim the full fair tions—such as those for amount. However, if you amount and the value of y amount.  The if your spouse is filing with ptions. 11 U.S.C. § 522(b)(3)	e exemption you c market value of th health aids, rights claim an exempti of the property is d	elaim. One way of doing so is to be property being exempted up to sto receive certain benefits, and son of 100% of fair market value etermined to exceed that amount,
2.	For any pr	operty you list on Sched	ule A/B that you claim as e	xempt, fill in the informatio	n below.	
		ription of the property a nedule A/B that lists this		Amount of the exemption Check only one box for each		Specific laws that allow exemption
	Brief					735 ILCS 5/12-1001(a)
	description		\$300.00	\$300	00	
	Line from	Clothing		100% of fair market v	alue, up to any	
	Schedule A	/B: <u>11</u>		арриосоло осалалогу		705 !! 00 5 (40 4004 (1)
	Brief description	:	\$40.00	<b>√</b>		735 ILCS 5/12-1001(b)
		ing account,		\$40.		
		Union One		100% of fair market v applicable statutory lii		
	Line from Schedule A	<i>/B:</i> 17		appcabio otatatory iii		
3.	•	•	emption of more than \$160, and every 3 years after that for a		of adjustment.)	

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Deborah L Rhyne Case number (if known) Last Name Last Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Copy the value from Schedule A/B		
Brief description: Savings account, Credit Union One	\$269.00	\$269.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17		applicable states y in the	
Brief description: Other financial account, Green Dot - Prepaid Debit	\$110.00	\$110.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Line from  Schedule A/B: 17			
Brief description: Term Life through employer Line from Schedule A/B: 31	\$0.00	\$0  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(f)
Brief description: 401(k) or similar plan, 401k through John Hancock	\$5,000.00	\$5,000.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1006
Line from Schedule A/B: 21 Brief	<b>*</b>		735 ILCS 5/12-1001(b)
description: Security deposit on rental unit, Landlord Line from Schedule A/B: 22	\$900.00	\$900.00  100% of fair market value, up to any applicable statutory limit	_
Brief description:  Costume Jewelry  Line from	\$150.00	\$150.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description:  TV (2), laptop, cell phone (2), bluetooth speaker	\$500.00	\$500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 07		applicable statutory limit	
Brief description: Co-Author: Women Riding Fearlessly Vol. II	Unknown	\$0  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

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			•			
Fill in this info	rmation to identify your c	ase:				
Debtor 1	Deborah	L	Rhyne			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)						
						Chaali if this is an
Official	Form 106D					Check if this is an amended filing
Schedi	ule D: Credit	ors Who Ha	ve Claims Secure	ed by Prop	erty	12/15
more space is	-		le are filing together, both are equ mber the entries, and attach it to t	•		
1. Do any	creditors have claims s	secured by your proper	rty?			
✓ No.	Check this box and sub-	mit this form to the court	with your other schedules. You hav	ve nothing else to rep	ort on this form.	
Yes	. Fill in all of the information	on below.				
Part 1: List	All Secured Claims					
for each		ditor has a particular claim,	red claim, list the creditor separately, list the other creditors in Part 2. As g to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any

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Fill in	this inforr	mation to identify your c	ase:					
Debto	or 1	Deborah	L	Rhyne				
Debto	or 2	First Name	Middle Name	Last Name				
	e, if filing)	First Name	Middle Name	Last Name				
United	d States B	ankruptcy Court for the:	Northern	District of Illinois (State)				
Case (If know	number vn)			(State)				
Offi	cial F	orm 106E/F				Chec	ck if this is an	amended filing
Sc	hedu	ile E/F: Cre	editors Who	Have Unsecure	d Claims			12/1
other Form claims the en knowr	party to a 106A/B) a sthat are stries in the stries.  List / Do any cr	any executory contracts and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At All of Your PRIORIT	s or unexpired leases the cutory Contracts and U Creditors Who Hold Clai		executory contract a). Do not include a ce is needed, copy	s on <i>Schedu</i> any creditors the Part yo	<i>le A/B: Prop</i> s with partia u need, fill it	erty (Official Ily secured cout, number
2.	isted, iden As much a Continuati	ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor	is. If a claim has both pri is in alphabetical order acc re than one creditor holds	s more than one priority unsecured clain ority and nonpriority amounts, list that o ording to the creditor's name. If you ha a particular claim, list the other creditor as for this form in the instruction bookle	claim here and show we more than two po s in Part 3.	both priority	and nonprior	ity amounts.
						Total claim	Priority amount	Nonpriority amount
2.1	IDOR-Ba	ankruptcy Section		Last 4 digits of account number		\$300.00	\$300.00	\$0.00
	PO Box Number  Chicago City	Street	60664 Zip Code	When was the debt incurred?  As of the date you file, the claim is apply.  Contingent Unliquidated	n/a s: Check all that			
		tor 1 only	0110.	Disputed				
	Deb <sup>s</sup>	tor 2 only		Type of PRIORITY unsecured claim  Domestic support obligations				
	_	tor 1 and Debtor 2 only		✓ Taxes and certain other debts you	u owe the			
		east one of the debtors ar		government  Claims for death or personal injur	v while vou were			
		ck if this claim relates aim subject to offset?	to a community debt	intoxicated	•			
	✓ No ☐ Yes	um outjoot to oncot.		Other. Specify				
2.2	IRS 1			Last 4 digits of account number		\$800.00	\$800.00	\$0.00
	PO Box			When was the debt incurred?	n/a			
	Number	Street		As of the date you file, the claim is	: Check all that			
	Debi	shia Pennsylva State urred the debt? Check tor 1 only tor 2 only tor 1 and Debtor 2 only east one of the debtors ar ck if this claim relates aim subject to offset?	Zip Code one. nd another	apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts you government Claims for death or personal injurintoxicated Other. Specify	u owe the y while you were			
	✓ No Yes			_				

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Debtor 1 Deborah Rhvne Case number (if known) First Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 City of Chicago - Parking and red Light Tickets \$5,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 121 N. LaSalle Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60602 Chicago Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_ Tickets Is the claim subject to offset? **✓** No Yes **CNAC** \$10,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 9150 S Harlem Ave Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60455 Illinois Bridgeview Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only  $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify Unsecured Auto Is the claim subject to offset? **✓** No Yes 4.3 ComEd \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center Street Number As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated Oakbrook Terrace 60181 Illinois City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim:  $\overline{\mathbf{A}}$ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Utility Is the claim subject to offset? Official Yes 106E/F Schedule E/F: Creditors Who Have Unsecured Claims page 2

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Debtor 1 Deborah Rhvne Case number (if known) First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 CONVERGENT OUTSOURCING \$705.00 4844 Last 4 digits of account number Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 When was the debt incurred? 3/2017 Street Number As of the date you file, the claim is: Check all that apply. Contingent 77043 Houston Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: SPRINT No Yes FIRST PREMIER BANK \$549.00 Last 4 digits of account number 1314 Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 11/2014 Number Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent Saint Cloud Minnesota 56302 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only  $\overline{}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? CreditCard **✓** No Yes JEFFERSON CAPITAL SYST 4.6 \$682.00 Last 4 digits of account number 3003 Nonpriority Creditor's Name When was the debt incurred? 16 MCLELAND RD 3/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated SAINT CLOUD 56303 Minnesota City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Collection Agent for Verizon

**✓** No

Is the claim subject to offset?

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Debtor 1 Deborah Rhvne Case number (if known) First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 PORTFOLIO RECOV ASSOC \$375.00 Last 4 digits of account number 5803 Nonpriority Creditor's Name 120 CORPORATE BLVD STE When was the debt incurred? 6/2016 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 23502 NORFOLK Virginia State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collection Agent for Capital One Is the claim subject to offset? No Yes REGIONAL ACCEPTANCE CO \$14,723.00 Last 4 digits of account number \_ 5401 Nonpriority Creditor's Name When was the debt incurred? 1/2014 765 ELA R D SUITE 205 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated LAKE ZURICH Illinois 60004 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Unsecured Automobile  $\overline{\mathbf{v}}$ Is the claim subject to offset?

✓ No ✓ Yes Case 18-21992 Doc 1 Filed 08/04/18 Entered 08/04/18 13:43:10 Desc Main Document Page 27 of 73

Debtor 1	Deborah First Name	L	dla Nama	Rhyne	Case number (if known)
Dart 3:	First Name  List Others to B		dle Name ut a Debt That You	Last Name	
				<u> </u>	debt that you already listed in Parts 1 or 2. For example, if a
colle	collection agency is trying to collect from you for a debt		u owe to someone el e creditor for any of t	lse, list the original creditor in Parts 1 or 2, then list the the debts that you listed in Parts 1 or 2, list the additional	
Arno	old Scott Harris			On which entry in F	Part 1 or Part 2 did you list the original creditor?
	W. Jackson # 600	kson # 600			of (Check Part 1: Creditors with Priority Unsecured Claims
Nur ——	Number Street			•	one):  Part 2: Creditors with Nonpriority Unsecured Claims
Chi	cago	Illinois	60604	Last 4 digits of acc	count number
City		State	Zip Code	9	<del></del>

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Debtor 1 Deborah Rhyne Case number (if known) First Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$1,100.00 6b. Taxes and certain other debts you owe the government

6c. Claims for death or personal injury while you were intoxicated

6c. \$0.00

\$0.00

6d. Other. Add all other priority unsecured claims. Write that amount here.

\$1,100.00

6e. Total. Add lines 6a through 6d. 6e.

**Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$33,534.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$33,534.00 6j. Total. Add lines 6f through 6i. 6j.

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Fill in this information to identify your case:						
Debtor 1	Deborah	L	Rhyne			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois			
			(State)			
Case number (If known)						

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or comp	pany with whom you have	the contract or lease	State what the contract or lease is for		
2.1	Taylor, Aneyshia Name 432 W Winneconna Pkwy			Residential Lease, Debtor is Lessee, Year to Year - Residential Lease		
	Number	Street				
	Chicago	Illinois	60620			
	City	State	Zip Code			

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			Do	cument Page 3	30 of 73
Fill in	this infor	mation to identify your c	ase:		
Debto	or 1	Deborah	L	Rhyne	
D.1.1.	0	First Name	Middle Name	Last Name	
Debto (Spous	or 2 se, if filing)	First Name	Middle Name	Last Name	<del></del>
United	d States B	ankruptcy Court for the:	Northern	District of Illinois	
Case	number			(State)	
(If know					
					Check if this is an amended filing
Off	icial	Form 106H			•
			labtava		
		e H: Your Cod			12/15
filing t	ogether, itries in t	both are equally respon	nsible for supplying corre	ct information. If more spa	omplete and accurate as possible. If two married people are ace is needed, copy the Additional Page, fill it out, and number of any Additional Pages, write your name and case number (if
1.	Do you	have any codebtors? (If	you are filing a joint case, o	lo not list either spouse as a	codebtor.)
	☐ No	)			
	<b>✓</b> Ye	S			
2.				roperty state or territory?	(Community property states and territories include Arizona, Wisconsin.)
		o. Go to line 3.	,	,	,
	Ye	s. Did your spouse, form	mer spouse, or legal equiv	alent live with you at the ti	ime?
	✓	No			
		Yes. In which commu	nity state or territory did y	ou live?	Fill in the name and current address of that person.
		Name of your spouse, f	ormer spouse, or legal equi	valent	<del></del>
		Number Street			_
		City	State	Zip Code	
3.	again a	s a codebtor only if that	person is a guarantor or	cosigner. Make sure you	f your spouse is filing with you. List the person shown in line 2 have listed the creditor on <i>Schedule D</i> (Official Form 106D), edule <i>D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3.1		Christopher			Schedule D, line
	Name	151 Oursinsham D	wh.co		
		151 Cunningham D	rive		Schedule E/F, line 4.7

60409

Zip Code

Schedule G, line

Number

City

Calumet City

Street

Illinois

State

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	20					
Fill in this information to	dentify your case:					
Debtor 1 Deborah	L	Rhyne				
First Name	Middle Name	Last Na	ame	— Che	eck if this is:	
ebtor 2 pouse, if filing) First Name	Middle Name	Last Na	amo	-   п	An amended filing	
					A supplement showing post-petition chapte	
nited States Bankruptcy C e: ase number	ourt for <u>Northern</u>	District of Illir (St	nois cate)		expenses as of the following date:	
known)				_	MM / DD / YYYY	
fficial Form 1	06I					
chedule I: You	ur Income				1:	
	needed, attach a separate sho er every question.		_		not include information about your ional pages, write your name and cas	
. Fill in your employment		Debtor 1			Debtor 2	
information.	Employment status	<b>✓</b> Employ	/ed		Employed	
If you have more than on attach a separate page wi		Not Em			Not Employed	
information about additio employers.	nal Occupation	Staffing Supervisor			_	
Include part time, season	al, or <b>Employer's name</b>	Gareda LL0				
self-employed work.  Occupation may include or homemaker, if it applie			431 Huntington Drive Number Street		Number Street	
от потпетнакет, п п аррпе	5.				_	
		Calumet	Illinois	60409		
		City City	State	Zip Code	_ City State Zip Code	
	How long employed there?					
		<b>m.</b> If you have r	nothing to repo	rt for any line, v	write \$0 in the space. Include your non-filing	
stimate monthly incom pouse unless you are sep	e as of the date you file this for arated.  use have more than one employer	-			or that person on the lines below. If you nee	
stimate monthly incom pouse unless you are sep you or your non-filing spo	e as of the date you file this for arated.  use have more than one employer	-	nformation for			
sstimate monthly incompouse unless you are sep you or your non-filing sponore space, attach a separate that the separate space.  List monthly gross was deductions.) If not paid	e as of the date you file this for arated.  use have more than one employer	r, combine the in	nformation for	all employers fo	or that person on the lines below. If you nee	
stimate monthly incompouse unless you are sep you or your non-filing sponore space, attach a sepanate.  List monthly gross wa	e as of the date you file this for arated.  use have more than one employer rate sheet to this form.  ges, salary, and commissions (beformonthly, calculate what the monthly)	r, combine the in	nformation for For I	all employers fo	or that person on the lines below. If you nee	

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Deb	tor 1Deborah First Name	L Middle Name	Last Name		Case number	(if		
	T IIST Name	Wildle Name	Last Name		known) For Debtor 1	For Debtor 2 or non-filing spouse		
Co	ppy line 4 here		→	4.	\$3,599.87			
	st all payroll ded							
5	a. Tax, Medicare,	and Social Security deductions		5a.	\$639.71			
51	b. <b>Mandatory co</b> n	ntributions for retirement plans		5b.	\$0.00			
50	c. Voluntary cont	ributions for retirement plans		5c.	\$0.00			
50	d. Required repay	yments of retirement fund loans		5d.	\$0.00			
5	e. Insurance			5e.	\$394.14			
51	f. Domestic suppo	ort obligations		5f.	\$0.00			
5	g. <b>Union dues</b>			5g.	\$0.00			
51	h. Other deduction	ons. Specify: Prepaid Legal		5h. +	\$42.14 +			
6. <b>Ac</b> +5h.	ld the payroll dec	ductions. Add lines 5a + 5b + 5c + 5d + 5e +	-5f + 5g	6.	\$1,075.99			
7. <b>C</b> a	alculate total mo	nthly take-home pay. Subtract line 6 from lin	ne 4.	7.	\$2,523.88			
8. <b>Li</b> s	st all other incom	ne regularly received:						
88	business, profe	,						
		ent for each property and business showing ordinary and necessary business expenses, an y net income.		Ва.	\$0.00			
81	b. Interest and di	vidends		3b.	\$0.00			
80	c. Family support dependent reg	payments that you, a non-filing spouse, oularly receive	or a					
		, spousal support, child support, maintenanc nt, and property settlement.		Вс.	\$0.00			
80	d. <b>Unemployment</b>	t compensation		Bd.	\$0.00			
86	e. Social Security	,	;	Be.	\$0.00			
81	Include cash ass	ent assistance that you regularly receive istance and the value (if known) of any non- that you receive, such as food stamps (benefi emental Nutrition Assistance Program) or es		8f.	\$0.00			
89	g. Pension or reti	rement income		8g.	\$0.00			
81	- h. <b>Other monthly</b>	income. Specify:		3h. +	\$0.00 +			
9. <b>Ac</b>	ld all other incon	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	g + 8h.	9.	\$0.00		1	
		income. Add line 7 + line 9.		10.	\$2,523.88 +		] =	\$2,523.88
11. S In fri	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.							
SI	pecify:						11. +	\$0.00
		n the last column of line 10 to the amount n the <i>Summary of Schedules and Statistical S</i>					12.	\$2,523.88  Combined monthly income
13.	No.	increase or decrease within the year afte	er you file th	is forn	n?			ontary modifie
	Yes. Explain:							

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		Docu	ument Page 33 of 73	3		
Fill in this info	rmation to identify you	ur case:				
Debtor 1	Deborah	L	Rhyne			
Debtor 2	First Name	Middle Name	Last Name	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng	
United States I	Bankruptcy Court for th	he: Northern	District of Illinois (State)		showing post-pe the following da	etition chapter 13 ate:
Case number (If known)	-			MM / DD / YYY	Y	
Official	Form 106	<u>J</u>				
Schedul	e J: Your Ex	rpenses				12/15
information. If (if known). Ans	more space is neede swer every question.	ed, attach another sheet to this	re filing together, both are equall s form. On the top of any additions			
	cribe Your House	hold				
1. Is this a jo						
✓ No. G	o to line 2					
Yes. D	loes Debtor 2 live in a	a separate household?				
	No					
	Yes. Debtor 2 mus	st file Official Forms 106J-2, Expe	nses for Separate Household of Deb	for 2.		
2. Do you hav	ve dependents?	No				
Do not list I Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does deper with you?	ndent live
			Child	23 years	No.	
					✓ Yes.	
_	penses include of people other	No				
than		l Yes				
yourself an dependent		163				
Part 2: Esti	mate Your Ongoin	ng Monthly Expenses				
-	of a date after the ba		you are using this form as a suppl oplemental Schedule J, check the	-	-	
	•	n-cash government assistance ed it on Schedule I: Your Income	-		Y	Your expenses
	I or home ownership or the ground or lot. 4	· ·	nclude first mortgage payments and		4.	\$900.00
If not inc	luded in line 4:					
	estate taxes				4a	\$0.00
4b. Prope	erty, homeowner's, or r	renter's insurance		4b.	\$0.00	

\$0.00

\$0.00

4c.

4d.

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1
 Deborah
 L
 Rhyne
 Case number (if known)

 First Name
 Middle Name
 Last Name

6. Utilities         6.a. \$250.00           6. Electricity, heat, natural gas         6a. \$250.00           6b. Water, sewer, garbage collection         6b. \$30.00           6c. Telephona, cell phone, Internet, satellite, and cable services         6c. \$180.00           6d. Other, Specify;         6d. \$30.00           7. Food and housekeeping supplies         7c. \$323.00           8. Childcare and children's education costs         8. \$30.00           9. Clothing, laundry, and dry cleaning         9. \$75.00           10. Personal care products and services         10. \$800.00           11. Medical and dental expenses         11. \$50.00           12. Transportation, Include gas, maintenance, bus or train fare.         12. \$350.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$30.00           14. Charitable contributions and religious donations         13. \$30.00           15. Insurance.         15a. \$30.00           15b. Health insurance         15a. \$30.00           15c. Vehicle insurance deducted from your pay or included in lines 4 or 20.         \$30.00           15c. Vehicle insurance         15a. \$30.00           15c. Vehicle insurance         15a. \$30.00           15c. Vehicle insurance         15a. \$30.00           15c. Taxes. Do not include taxes deducted from your pay or included in	First Name	Middle Name Last Name		
6. Utilities         6.8. Electricity, heat, natural gas         6.8. \$35.00           6. D. Water, sewer, garbage collection         6b. \$30.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c. \$180.00           6d. Other: Specify:         6d. \$30.00           7. Food and housekeeping supplies         8. \$30.00           8. Childcare and children's education costs         8. \$30.00           9. Clothing, laundry, and dry cleaning         9. \$75.00           10. Personal care products and services         10. \$300.00           11. Medical and dental expenses         11. \$50.00           12. Transportation, Include gas, maintenance, bus or train fare.         12. \$350.00           Do not include car payments         13. \$30.00           14. Charitable contributions and religious donations         13. \$30.00           15. Insurance.         15. \$30.00           Do not include insurance deducted from your pay or included in lines 4 or 20.         15. \$30.00           15. Vehicle insurance         15. \$30.00           15. Lies insurance.         15. \$30.00           15. Vehicle insurance.         15. \$30.00           15. Vehicle insurance         15. \$30.00           15. Vehicle insurance.         15. \$30.00           15. Taxes. Do not include taxes deducted from your pay or included in lines				Your expenses
6a. Electricity, heat, natural gas         6a.         \$250.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$180.00           6d. Other, Speelby:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$423.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$75.00           10. Personal care products and services         10.         \$80.00           11. Medical and dental expenses         11.         \$50.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$350.00           15. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           15. Insurance.         15.         \$0.00           16. Charitable contributions and religious donations         15.         \$0.00           15. Insurance.         15.         \$0.00           15. Literiainment, clubs, recreation, newspapers, magazines, and books         15.         \$0.00           15. Literiainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           15. Literiainment, clubs,	5. Additional mortgage payment	s for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$180.00           6d. Other. Specify:         7c.         \$423.00           7c. Food and housekeeping supplies         7c.         \$423.00           8c. Childcare and children's education costs         8c.         \$0.00           9c. Clothing, Iaundry, and dry cleaning         9c.         \$75.00           10. Personal care products and services         11c.         \$80.00           11. Medical and dental expenses         11c.         \$80.00           12. Transportation. Include gas, maintenance, bus or train fare.         12c.         \$350.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$40.00           15. Insurance         15a.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a.         \$0.00           15c. Vehicle insurance         15a.         \$0.00           15c. Vehicle insurance         15a.         \$0.00           15c. Vehicle insurance         15c.         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or inc	6. Utilities:			
Sc. Telephone, cell phone, Internet, satellite, and cable services   Sc.   \$180.00	6a. Electricity, heat, natural gas		6a.	\$250.00
6d. Other. Specify:	6b. Water, sewer, garbage collect	otion	6b.	\$0.00
7. Food and housekeeping supplies       7.       \$423.00         8. Childcare and children's education costs       8.       \$0.00         9. Clothing, laundry, and dry cleaning       9.       \$75.00         10. Personal care products and services       10.       \$80.00         11. Medical and dental expenses       11.       \$50.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       13.       \$30.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       15.       \$0.00         15. Insurance.       156       \$0.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15c. Vehicle insurance       15a       \$0.00         15d. Other insurance. Specify:       15a       \$0.00         15. Lawses. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         15. Transportents for Vehicle 1       17a       \$0.00         17. Christ-Specify:       17a       \$0.00         17. Corpayments for Vehicle 2       17b       \$0.00         17c. Car payments for Vehicle 2       17c       \$0.00         17c. Other-Specify:<	6c. Telephone, cell phone, Inter	net, satellite, and cable services	6c.	\$180.00
7. Food and housekeeping supplies       7.       \$423.00         8. Childcare and children's education costs       8.       \$0.00         9. Clothing, laundry, and dry cleaning       9.       \$75.00         10. Personal care products and services       10.       \$80.00         11. Medical and dental expenses       11.       \$50.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       13.       \$30.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       15.       \$0.00         15. Insurance.       156       \$0.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15c. Vehicle insurance       15a       \$0.00         15d. Other insurance. Specify:       15a       \$0.00         15. Lawses. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         15. Transportents for Vehicle 1       17a       \$0.00         17. Christ-Specify:       17a       \$0.00         17. Corpayments for Vehicle 2       17b       \$0.00         17c. Car payments for Vehicle 2       17c       \$0.00         17c. Other-Specify:<	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning       9.       \$75.50         10. Personal care products and services       10.       \$80.00         11. Medical and dental expenses       11.       \$50.00         12. Transportation, Include gas, maintenance, bus or train fare.       12.       \$355.00         Do not include car payments       13.       \$0.00         14. Charitable contributions and religious donations       13.       \$0.00         15. Insurance.       15.       \$0.00         15. Insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a.       \$0.00         15. Other insurance. Specify:       15a.       \$0.00         15. Vehicle insurance.       15c. Vehicle insurance.       15c.       \$0.00         15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00         <			7.	\$423.00
10. Personal care products and services       10.       \$80.00         11. Medical and dental expenses       11.       \$50.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$350.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$40.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15b. Health insurance       15a       \$0.00         15c. Vehicle insurance       15c       \$0.00         15c. Vehicle insurance. Specify:       15d       \$0.00         15c. Vehicle insurance. Specify:       15d       \$0.00         15c. Vehicle insurance. Specify:       15c       \$0.00         15c. Vehicle insurance. Specify:       15c       \$0.00         15c. Vehicle insurance. Specify:       15d       \$0.00         15c. Vehicle insurance. Specify:       15c       \$0.00         17b. Car payments for Vehicl	8. Childcare and children's educ	ation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$50.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$350.00         12. Intertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$40.00         15. Insurance.       Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a       \$0.00         15b. Health insurance       15b. Health insurance       15c. Vehicle insurance       <	9. Clothing, laundry, and dry clea	aning	9.	\$75.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  17c. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other payments on included in lines 4 or 5 of this form or on Schedule I: Your Income.  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property. 20a. Mortgages on other property. 20b. Real estate taxes. 20b. So.00 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. So.00 20d. Maintenance, repair, and upkeep expenses.	10. Personal care products and	services	10.	\$80.00
Do not include car payments   13.	11. Medical and dental expenses	\$	11.	\$50.00
14. Charitable contributions and religious donations       14. \$40.00         15. Insurance.       30.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$0.00         15b. Health insurance       15b. \$0.00       15b. We health insurance       15b. \$0.00         15c. Vehicle insurance. Specify:       15d. \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         Specify:       16       \$0.00         17. Installment or lease payments:       17a. \$0.00         17a. Car payments for Vehicle 1       17a. \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c. \$0.00         17d. Other. Specify:       17c. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.0		naintenance, bus or train fare.	12.	\$350.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. So.000 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 19. Other payments you make to support others who do not live with you. Specify: 19. So.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20c. Other real property, and upkeep expenses.	13. Entertainment, clubs, recrea	tion, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16  17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 17d. Other specify: 17d. Other specify: 17d. Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Your payments you make to support others who do not live with you. Specify: 19. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20c. Specify: 20d. Maintenance, repair, and upkeep expenses.	14. Charitable contributions and	religious donations	14.	\$40.00
15b. Health insurance		ted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance       15c       \$0.00         15d. Other insurance. Specify:       15d       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       Specify:       \$0.00         17. Installment or lease payments:       17a. Car payments for Vehicle 1       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17d. Other. Specify:       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19.       \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20c. Maintenance, repair, and upkeep expenses.       20d       \$0.00	15a. Life insurance		<b>1</b> 5a	\$0.00
15d. Other insurance. Specify: 15d \$0.00  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 16  17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: 17c \$0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you.  Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	15c. Vehicle insurance		15c	\$0.00
Specify:	15d. Other insurance. Specify:		15d	\$0.00
17.   Installment or lease payments:   17a. Car payments for Vehicle 1	16. Taxes. Do not include taxes de	ducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:       17a. Car payments for Vehicle 1       17a. \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c. \$0.00         17d. Other. Specify:       17d. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d. \$0.00	Specify:		16	\$0.00
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.	17. Installment or lease payment	ts:	10	
17c. Other. Specify: 17d. Other. Specify: 17d. Specify: 17d. Specify: 17d. Other. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 18d. Specify: 18d. Specify: 18d. Specify: 19d. Spec			17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehicle 2		17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. So.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00				\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. So.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00		, ,,		\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00			10.	
20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00	Specify:			\$0.00
20b. Real estate taxes.  20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20.Other real property expenses	not included in lines 4 or 5 of this form or on Schedule		
20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	20a. Mortgages on other proper	ty	20a	\$0.00
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20b. Real estate taxes.		20b	\$0.00
	20c. Property, homeowner's, or	renter's insurance	20c	\$0.00
20e. Homeowner's association or condominium dues 20e \$0.00	20d. Maintenance, repair, and u	pkeep expenses.	20d	\$0.00
	20e. Homeowner's association	or condominium dues	20e	\$0.00

Official Form 106J Schedule J: Your Expenses page 2

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Debtor 1			L	Rhyne	Case number (if known)			
	First Nam	е	Middle Name	Last Name				
21.Other	. Specify	<u> </u>				21		\$0.00
22. Calc	ulate yo	ur monthly expenses.				\$2,348.00		
		4 through 21.			\$0.00			
		`	,,	from Official Form 106J-2			_	\$2,348.00
22c. <i>F</i>	Add line 2	22a and 22b. The result	is your monthly exp	enses.		22.		
23.Calcu	late you	ır monthly net income	٠.					
23a. (	Copy line	12 (your combined mo	onthly income) from	Schedule I.		23a		\$2,523.89
23b. (	Сору уог	ur monthly expenses fro	m line 22 above.			23b		\$2,348.00
		your monthly expenses		ncome.				\$175.89
•	The resu	It is your monthly net in	come.			23c		
24. <b>Do y</b> o	ou exped	ct an increase or decr	ease in your expen	ses within the year after	you file this form?			
Ford	vamplo	do vou expect to finish	paying for your carl	oan within the year or do y	ou expect vour			
				nodification to the terms of				
<b>√</b> N	lo							
	'es							
Ш.								
		Explain here:						

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Fill in this information to identify your case:					
Debtor 1	Deborah	L	Rhyne		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number					
(If known)					

#### Official Form 106Dec

#### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below					
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
	<b>✓</b> No					
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and				
×	/s/ Deborah Rhyne	×				
	Signature of Debtor 1	Signature of Debtor 2				
	Date 8/4/2018	Date				
	MM/DD/YYYY	MM/DD/YYYY				

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Fill i	n this i	informatio	on to identify your c	ase:					
Deb	tor 1		oorah	L	Rhyn				
Deb	tor 2	Firs	st Name	Middle	Name Last I	Name			
	use, if fili	ing) Firs	st Name	Middle	Name Last I	Name			
Unit	ed Stat	tes Bankr	uptcy Court for the:	Northern	District of I	Ilinois State)			
Cas (If kno	e numl	ber							
		. –	407						Check if this is a
<u>Ot</u>	†ICI8	al Fo	rm 107						amended filing
Sta	aten	nent	of Financia	ıl Affairs f	or Individual	s Filing for	Bankru	ıptcy	04/1
info	rmatio	on. If mo		ed, attach a sep	narried people are fili arate sheet to this fo				
Par	t 1: C	Give Det	tails About Your	Marital Status	and Where You Liv	ved Before			
1.	Wha	at is your	current marital sta	atus?					
	ш	Married Not mar	ried						
2.	Duri	ing the la	ıst 3 years, have yo	ou lived anywher	e other than where yo	u live now?			
	Ľ	No Yes. List	all of the places yo	ou lived in the las	t 3 years. Do not inclu	de where you live n	ow.		
		Debtor 1	l:		Dates Debtor 1 live there	Debtor 2:			Dates Debtor 2 lived there
						Same as	Debtor 1		Same as Debtor 1
		Number	Street		From	Number Stree	et .		From
					То	-			То
		City	State	Zip Code		City	State	Zip Code	
	_					Same as	Debtor 1		Same as Debtor 1
		Number	Street		From	Number Stree	t		From
					То	<u></u>			То
		City	State	Zip Code		City	State	Zip Code	
3.					oouse or legal equivalosiana, Nevada, New Mex				mmunity property states
		No		,, 2341	.,	,	,	,	
	· ·		e sure you fill out S	chedule H: Your	Codebtors (Official Fo	orm 106H).			

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ebtor 1 Deboran L First Name Midd	Ile Name Last N		umber (if known)	
art 2: Explain the Sources of Your In	icome			
Did you have any income from employn Fill in the total amount of income you rece activities. If you are filing a joint case and y No  Yes. Fill in the details.	nent or from operating a belived from all jobs and all bu	sinesses, including part-time	•	years?
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$26930.00	Wages, commissions, bonuses, tips Operating a business	
For last calendar year: (January 1 to December 31, 2017 )  YYYY	Wages, commissions, bonuses, tips Operating a business	\$40315.00	Wages, commissions, bonuses, tips Operating a business	
For the calendar year before that: (January 1 to December 31, 2016)  YYYYY	Wages, commissions, bonuses, tips Operating a business	\$45125.00	Wages, commissions, bonuses, tips Operating a business	
Include income regardless of whether that public benefit payments; pensions; rental in filing a joint case and you have income that List each source and the gross income from No Yes. Fill in the details.	ncome; interest; dividends; r t you received together, list i	money collected from lawsuits; it only once under Debtor 1.	royalties; and gambling and	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
From January 1 of current year until the date you filed for bankruptcy:				
For last calendar year: (January 1 to December 31, 2017 )  YYYY	-			
For the calendar year before that: (January 1 to December 31, 2016)  YYYY				

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Rhyne Debtor 1 Deborah Case number (if known) First Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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1	Deborah		<u>L</u>	Rhy		Case number	(if known)
	First Name		Middle Name	Las	t Name		
nsi orp age	ders include your porations of which	relatives; an you are a for a busin	ny general partner n officer, director, ess you operate a	s; relatives of any operson in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider?  You are a general partner;  If securities; and any managing  If domestic support obligations,
<b>✓</b>	No						
	Yes. List all pay	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insi	der? ude payments on No	debts gua	ranteed or cosigne	ed by an insider.	Total amount paid	Amount you still owe	n account of a debt that benefited an  Reason for this payment
				paye	paid	Sun <b>S</b> 11 S	Include creditor's name
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
			p				
	Insider's Name						
	Insider's Name  Number Street						
		State	Zip Code				

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Debtor 1 Deborah Rhvne Case number (if known) First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Car Impounded 06/2017 \$0 City of Chicago - Parking and red Light Tickets Creditor's Name Explain what happened Department of Revenue - PO Box 88292 Number Street Property was repossessed. Property was foreclosed. Illinois 60680 Chicago Property was garnished. City State Zip Code Property was attached, seized, or levied. Value of the Describe the property Date property Car Repossessed \$0 07/2017 REGIONAL ACCEPTANCE CO Creditor's Name Explain what happened **765 ELA R D SUITE 205** Number Street Property was repossessed. Property was foreclosed. LAKE ZURICH Illinois 60004 Property was garnished. City Zip Code State Property was attached, seized, or levied.

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Debt	tor 1	Deborah	L	Rhyne	Case number (if known)		
		First Name	Middle Name	Last Name			
11.		thin 90 days before you file counts or refuse to make a			ank or financial institution,	set off any amou	ints from your
	<b>✓</b>	No					
		Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account r	number: XXXX-		
		City State	Zip Code				
12.		hin 1 year before you filed pointed receiver, a custodi			oossession of an assignee fo	r the benefit of o	creditors, a court-
	<b>✓</b>	No					
		Yes					
Part	5:	List Certain Gifts and 0	Contributions				
13.	Wi	ithin 2 years before you file	ed for bankruptcy, did	you give any gifts with a to	otal value of more than \$600	per person?	
	<b>✓</b>	No Yes. Fill in the details for	each gift.				
		Gifts with a total value o per person	f more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave	e the Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to yo	u				
		Person to Whom You Gave	e the Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to yo	u				

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Debt		Deborah	L	Rhyne	Case number (if known)		
		First Name	Middle Name	Last Name			
14.	Wit	hin 2 years hefore you fi	iled for hankruntey did	I you give any gifts or contrib	outions with a total value of	more than \$600	to any charity?
14.	VVII		neu ioi bankiupicy, uic	i you give any gints or continu	ditions with a total value of	more man 9000	to any charity:
	✓	No					
		Yes. Fill in the details for	or each gift or contribut	ion.			
		Gifts or contributions t	to charities	Describe what you cont	ributed	Date you	Value
		that total more than \$	600			contributed	
		Charity's Name		-			
				_			
		Number Street		_			
				_			
		City State	zip Code				
_							
Part	6:	List Certain Losses					
15.		nin 1 year before you file nbling?	ed for bankruptcy or si	nce you filed for bankruptcy,	did you lose anything beca	use of theft, fire,	other disaster, or
	_						
	✓	No					
	П	Yes. Fill in the details.					
		Describe the property	vou lost and	Describe any insurance	coverage for the loss	Date of your	Value of property
		how the loss occurred		Include the amount that i		loss	lost
				pending insurance claims	on line 33 of Schedule		
				A/B: Property.			
		List Certain Paymen	T				
		ut seeking bankruptcy o ude any attorneys, bankru No		rcy petition? or credit counseling agencies fo	r services required in your bar	nkruptcy.	
		Yes. Fill in the details.					
	Ľ			Description and value of	f ann muamanti	Data naumant	Amount of
				Description and value o transferred	тапу ргорегту	Date payment or transfer	payment
						was made	<b>.</b>
		Semrad Law Firm Person Who Was Paid		Attorney's Fee - 100.00		8/4/2018	\$100.00
		20 S. Clark Street					
		Number Street		-			
		28th Floor					
				-			
		Chicago Illino		-			
		City State	e Zip Code				
		Email or website address	3	-			
		-		_			
		Person Who Made the P	ayment, if Not You				
		Person Who Was Paid		-			
		-		_			
		Number Street					
				-			
				-			
		City State	e Zip Code	<del>-</del> -			
				- - -			
		City State Email or website address		- - -			

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Debtor	1 Deborah	L	Rhyne Case	e number <i>(if known)</i>	
	First Name	Middle Name	Last Name		
he	elp you deal with your crop not include any payment	editors or to make paym		f pay or transfer any property to	anyone who promised to
	1 es. I III III li le details.				
			Description and value of any prope transferred	rty Date payment or transfer was made	Amount of payment
	Person Who Was Paid				
	Number Street				
			-		
	City Stat	te Zip Code			
	No Yes. Fill in the details.		Description and value of property transferred	Describe any property or payments received or debts in exchange	Date paid transfer was made
	Person Who Received 1	Fransfer	-		
	Number Street				
	City Stat Person's relationship to	•			
	Person Who Received 1	Fransfer			
	Number Street				
	City Stat Person's relationship to	•			
be	eneficiary? nese are often called asset		d you transfer any property to a self-set	tled trust or similar device of wh	ich you are a
_	1 - 25		Description and value of the prop	erty transferred	Date transfer was made
	Name of trust				

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Debtor 1 Deborah Rhvne Case number (if known) First Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code City State Zip Code

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Debtor 1 Deborah Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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Debto		Deborah		L	Rhyn		Case	e number <i>(i</i>	f known)	
		First Name		Middle Name	Last i	Name				
26. I	Hav	e you been a part	y in any judic	al or administ	rative proceed	ling under	any environmen	tal law? In	nclude settlements and orde	ers.
	<b>✓</b>	No								
i		Yes. Fill in the det	tails.							
_					Court or agen	ісу		Nature	of the case	Status of the case
		Case title			On the same					Pending
					Court Name					On appeal
		Case number			NumberStreet					Concluded
					City	State	Zip Code			_
Part 1	11:	Give Details Al	oout Your B	usiness or Co	onnections t	o Any Bu	siness			
27. V	With	nin 4 vears hefore	you filed for I	nankruntov die	d vou own a bi	usiness or	have any of the	following c	connections to any business	s?
		-			-		-	_	-	<i>.</i> .
					-		r activity, either fo	ull-time or p	oart-time	
		_		ılıty company (I	LLC) or limited	liability pa	artnership (LLP)			
		A partner in a	-		_					
				naging executiv	•					
		An owner of	at least 5% of	the voting or e	equity securitie	s of a corp	poration			
	<b>V</b>	No. None of the a	above applies	. Go to Part 12						
	Ħ	Yes. Check all tha	at apply abov	e and fill in the	details below	for each t	ousiness.			
					Describ	e the nati	ure of the busine	SS	Employer Identification r	number Do not
									include Social Security n	umber or ITIN.
		Business Name			_				EIN:	
		Number Street			_				Dates business existed	
		rampor onoor			Name o	of account	ant or bookkeep	er		
		City	State	Zip Code					From To	
					Describ	e the natu	ure of the busine	ss	Employer Identification r include Social Security n	
									EIN:	
		Business Name								
		Number Street			_	_			Dates business existed	
		City	State	Zip Code	Name o	f account	ant or bookkeep	er	F. v. v. T.	
		City	State	Zip Code					From To	
					Describ	e the natu	ure of the busine	SS	Employer Identification r include Social Security n	
		Business Name			_				EIN:	
					_					
		Number Street			Name o	of account	ant or bookkeep	er	Dates business existed	
		City	State	Zip Code		. account	ant of bookkeep		From To	
					1					

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Debt	tor 1 Deborah		L	Rhyne	Case number (if known)
	First Name		Middle Name	Last Name	
28.	creditors, or oth		or bankruptcy, did y	ou give a financial stateme	ent to anyone about your business? Include all financial institutions,
	_			Date issued	
	Name			MM/DD/YYYY	
	Number S	Street		_	
	City	State	Zip Code	_	
Part	12: Sign Belo	w			
t	rue and correct.	I understand tha	t making a false sta	atement, concealing prope	ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ Deborah Rh	•		
	;	Signature of Debto	or 1		Signature of Debtor 2
		Date 8/4/2018			Date
[ [	✓ No Yes				duals Filing for Bankruptcy (Official Form 107)?
		ree to pay some	one who is not an a	ttorney to help you fill out I	pankruptcy forms?
	<b>√</b> No				
	Yes. Name of	person			Attach the Bankruptcy Petition Preparer's Notice,

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B2030 (Form 2030) (12/15)

## **UNITED STATES BANKRUPTCY COURT**

		Nort	hern District of Illi	nois	
In re	Deborah L Rhyne			Case No.	
	Debtor				(If known)
				Chapter	Chapter 13
	DISCLOSURE OF	COMPEN	NSATION OF	<b>ATTORNEY</b>	FOR DEBTOR
cor	rsuant to 11 U.S.C. § 329(a) and F npensation paid to me within one dered or to be rendered on behalf	year before the	filing of the petition in	bankruptcy, or agreed	d to be paid to me, for services
For	legal services, I have agreed to ac	cept			\$4,000.00
Pri	or to the filing of this statement I h	nave received			\$100.00
Bal	ance Due				\$3,900.00
2. The	e source of the compensation paid	I to me was:			
	Debtor		ther (specify)		
3. The	e source of the compensation paid	I to me is:			
	<b>✓</b> Debtor		ther (specify)		
4. 🗸	I have not agreed to share the ab members and associates of my la		compensation with any	other person unless	they are
	I have agreed to share the above- members or associates of my law the people sharing in the comper	firm. A copy o	f the agreement, togeth		
5. ln r	return for the above-disclosed fee,	I have agreed t	o render legal service f	or all aspects of the ba	ankruptcy case, including:
	<ul> <li>a. Analysis of the debtor's finan bankruptcy;</li> </ul>	cial situation, a	and rendering advice to	the debtor in determin	ning whether to file a petition in
	b. Preparation and filing of any p	oetition, schedu	ules, statements of affa	irs and plan which ma	ay be required;
	c. Representation of the debtor	at the meeting	of creditors and confire	mation hearing, and ar	ny adjourned hearings thereof;
	d. Representation of the debtor	in adversary pr	oceedings and other co	ontested bankruptcy n	matters;
6. By	agreement with the debtor(s), the	above-disclose	ed fee does not include	the following services	3:
			CERTIFICATION		
	ify that the foregoing is a complet in this bankruptcy proceedings.	e statement of	any agreement or arran	gement for payment t	to me for representation of the
	8/4/2018			/s/ Elise Harmening	
	Date			Signature of Attorney	
				Semrad Law Firm	
	•			Name of law firm	

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

## THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

## THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

## B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

## THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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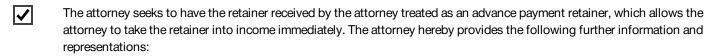
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

## E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$353.23
- 3. Before signing this agreement, the attorney has received, \$100.00 toward the flat fee, leaving a balance due of \$3,900.00; and \$43.23 for expenses, leaving a balance due of \$4,253.23
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	8/4/2018	
Signed:	:	
/s/ Debo	orah Rhyne	
		/s/ Elise Harmening
Debtor(	s)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

## **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

## Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

## **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

## Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

# Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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# UNITED STATES BANKRUPTCY COURT

**Northern District of Illinois** 

In re:	Rhyne, Deborah L	Case No.	
	Debtor(s)		
		Chapter.	Chapter13
	VERIFIC	ATION OF CREDITOR MAT	RIX
knowled	The above named Debtors hereby verify lge.	that the attached list of creditors is tru	ue and correct to the best of their
Date:	8/4/2018	/s/ Rhyne, Debor Rhyne, Deborah	
		Signature of Deb	tor

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD, MN, 56303

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

PORTFOLIO RECOV ASSOC PO Box 41067 Norfolk, VA, 23541

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

Arnold Scott Harris 111 W. Jackson # 600 Chicago, IL, 60604

IRS 1 PO Box 7346 Philadelphia, PA, 19101

IDOR-Bankruptcy Section Po Box 851388 Minneapolis, MN, 55485

ComEd 1919 Swift Drive Oak Brook, IL, 60523

REGIONAL ACCEPTANCE CO Po Box 1847 Wilson, NC, 27894

CNAC 3227 S Westnedge Ave Kalamazoo, MI, 49008

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Debtor 1 Deborah First Name	L Rhyr Middle Name Last	ne Case	e number (if known)	
	estions for Reporting Purposes	ivame		
16. What kind of debts do you have?	16a. Are your debts primarily co "incurred by an individual pr No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily bu	imarily for a personal, far siness debts? Business estment or through the o	nily, or household purpose."  debts are debts that you incurred peration of the business or investigation.	d to obtain
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that fund  No.	Do you estimate that after a	any exempt property is excluded and ute to unsecured creditors?	d administrative
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,0 ☐ 50,001-100, ☐ More than 10	000
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5	0 million	001-\$10 billion 0,001-\$50 billion
20. How much do you estimate your liabilities to be?	▼ \$0-\$50,000  ■ \$50,001-\$100,000  ■ \$100,001-\$500,000  ■ \$500,001-\$1 million	\$1,000,001-\$10 ( \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5	0 million	001-\$10 billion 0,001-\$50 billion
Part 7: Sign Below	Lhave examined this potition, and	I dodaro undor panalty of	f navium, that the information are	ided to the const
For you	I have examined this petition, and correct.  If I have chosen to file under Chap of title 11, United States Code. I under Chapter 7.	ter 7, I am aware that I manderstand the relief avail	ay proceed, if eligible, under Cha able under each chapter, and I ch	pter 7, 11,12, or 13 oose to proceed
	If no attorney represents me and I out this document, I have obtained I request relief in accordance with I understand making a false statem connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 151  /s/ Deborah Rhyne Signature of Debtor 1  Executed on	and read the notice required and read the notice required the chapter of title 11, United, concealing property e can result in fines up to 19, and 3571	uired by 11 U.S.C. § 342(b). nited States Code, specified in th r, or obtaining money or property	is petition. by fraud in up to 20 years, or

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Fill in this inform	mation to identify your ca	ase:	<b>数数数数数数</b>	\$2.45	
Debtor 1	Deborah First Name	L Middle Name	Rhyne Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
	ankruptcy Court for the:	Northern	District of Illinois		
Case number (If known)			(State)		
Official I	Form 106De	C			Check if this is a amended filing
Declarati	ion About an l	Individual Debte	or's Schedule:	S	12/1
You must file th money or prope	nis form whenever you fi erty by fraud in connecti 1341, 1519, and 3571.	er, both are equally respon ile bankruptcy schedules o on with a bankruptcy case	r amended schedules. M	et information. laking a false statement, concealing pro \$250,000, or imprisonment for up to 20	perty, or obtaining years, or both. 18
Did you pa	ay or agree to pay some	one who is NOT an attorne	ey to help you fill out ban	kruptcy forms?	
✓ No ☐ Yes. N	Name of person		Attach Bankruptcy Signature (Official F	Petition Preparer's Notice, Declaration, and Form 119).	
	w 				
	are true and correct.	e that I have read the sum I	mary and schedules filed	with this declaration and	

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

MM/DD/YYYY

Date 8/4/2018

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Debto	r 1 Deborah First Name	L Middle Name	Rhyne	Case number (if known)
	ristrane	Middle Name	Last Name	
28. V	Nithin 2 years before you creditors, or other parties	filed for bankruptcy, did y s.	you give a financial stater	nent to anyone about your business? Include all financial institutions,
Г	√ No			
	Yes. Fill in the details	below.		
			Date issued	
	Name		MMODROOM	_
	Name		MM/DD/YYYY	
	Number Street			
	City S	tate Zip Code	_	
Part 1	2: Sign Below			
STATE OF STREET				
l h	ave read the answers on	this Statement of Financi	ial Affairs and any attach	ments, and I declare under penalty of perjury that the answers are
a b	ankruptcy case can resu	alt in fines up to \$250,000	atement, concealing prop , or imprisonment for up t	perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
			1	s
	<b>X</b> /a/ Deb.	orah Rhyne	Sulat 0	×
	Signature o		THOUSE THE	Signature of Debtor 2
	·			Date
	Date 8/4/2	2018		
Dic	d you attach additional pa	ages to Your Statement o	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
	No			
	Yes			A.
<u></u>	163			
Dic	l you pay or agree to pay	someone who is not an a	ttorney to help you fill ou	bankruptcy forms?
7	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,
L	'			Declaration, and Signature (Official Form 119)

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## **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Rhyne, Deborah L	Case No	
	Debtor(s)		
		Chapter.	Chapter13
	VERIFI	CATION OF CREDITOR MATRI	X
Th knowledge	ne above named Debtors hereby veri e.	fy that the attached list of creditors is true a	and correct to the best of their
Date:	8/4/2018	/s/ Rhyne, Deborah L Rhyne, Deborah L Signature of Debtor	D. Bhyno

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Debt		Deborah	L	Rhyne	Case number (if known)	
		First Name	Middle Name	Last Name		
16.	Cal	lculate the median family inc	ome that applies to y	ou. Follow these step	ps:	
	16a	a. Fill in the state in which you li	ve.	Illinois	_	
	16b	b. Fill in the number of people in	your household.	2		
	160	c. Fill in the median family incon	ne for your state and siz	ze of		\$68,687.00
		household	concrete inetructions fo	To fil	nd a list of applicable median income amounts, go online	
17.	Hov	w do the lines compare?	separate instructions to	or this form. This list	may also be available at the bankruptcy clerk's office.	
		The state of the s	gual to line 16e. On the	aton of name 1 of th	is farmer about the set of Director to the second set of the second seco	
	174	— under 11 U.S.C. § 1325(	(b)(3). <b>Go to Part 3.</b> Do	NOT fill out Calcula	is form, check box 1, <i>Disposable income is not determined tion of Disposable Income</i> (Official Form 122C-2).	
	17b	Line 15b is more than lin  U.S.C. § 1325(b)(3). Go  form, copy your current r	to Part 3 and fill out (	Calculation of Dispo	neck box 2, <i>Disposable income is determined under 11</i> osable Income (Official Form 122C-2). On line 39 of that	
Part	3:	Calculate Your Commitm	ent Period Under	11 U.S.C. §1325(	b)(4)	
18.	Cop	py your total average monthly	income from line 11.	MONTH CITCH CLOSES OF STREET		\$3,617.80
19.	Dec con	duct the marital adjustment in mitment period under 11 U.S.	fit applies. If you are r C. § 1325(b)(4) allows y	married, your spouse you to deduct part of	is not filing with you, and you contend that calculating the your spouse's income, copy the amount from line 13.	
	19a	a. If the marital adjustment does	not apply, fill in 0 on li	ne 19a.	*	- <u>\$0.00</u>
	19b	o. Subtract line 19a from line	18.			\$3,617.80
20.	Cal	culate your current monthly i	ncome for the year. F	ollow these steps:		
	20a	a. Copy line 19b.				\$3,617.80
		Multiply by 12 (the number of	months in a year).			x 12
	20b	o. The result is your current mon	thly income for the yea	r for this part of the f	form.	\$43,413.60
	20c	c. Copy the median family incom	ne for your state and siz	ze of household from	n line 16c.	\$68,687.00
21.	Hov	w do the lines compare?				
	V	Line 20b is less than line 20c. commitment period is 3 years.	Unless otherwise ordere Go to Part 4.	ed by the court, on the	he top of page 1 of this form, check box 3, The	
		Line 20b is more than or equal 4, The commitment period is 5	to line 20c. Unless oth years. Go to Part 4.	erwise ordered by th	e court, on the top of page 1 of this form, check box	
Part	4: 5	Sign Below				
		By signing here, I declare unde	r penalty of periury that	the information on t	his statement and in any attachments is true and correct.	
		- 1 (1 212) - 120	0 101		and controls and any account to the and and controls.	
		x /s/ Deborah Rhyne /	1) C/2/2	2010	c	
		Signature of Debtor 1	J. Hug	HL .	Signature of Debtor 2	
		-	/			
		Date 8/4/2018 MM/DD/YYYY			Date MM/DD/YYYY	
		If you checked 17a, do NOT fill If you checked 17b, fill out For above.	out or file Form 122C- n 122C-2 and file it wit	·2. th this form. On line	39 of that form, copy your current monthly income from line	14

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

## B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

## THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

## D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

## E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$353.23
- 3. Before signing this agreement, the attorney has received, \$100.00 toward the flat fee, leaving a balance due of \$3,900.00; and \$43.23 for expenses, leaving a balance due of \$4,253.23
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 8/4/2018	
Signed:	
/s/ Deborah Rhyne	/s/ Elise Harmening
Debtor(s)  Do not sign if the fee amounts at top of this page are blank.	Attorney for Debtor(s)

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## THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28<sup>th</sup> Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Deborah L Rhyne,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required to pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Section 3.1, 3.2, or 3.3 (for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may lower that amount that the Firm will receive each month and increase the

## THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28<sup>th</sup> Floor Chicago, IL 60603 (312) 913-0625

monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

A Chapter 13 plan will be filed on your behalf to repay your creditors. Your Chapter 13 plan payment will be \$175.00 at the time of filing. This monthly Chapter 13 plan payment can be subject to change during your case. Included within this monthly plan payment is the Firm's compensation for representing you during the Chapter 13. You will be paying the Firm an attorney fee of \$4,000.00, with an initial down payment of \$100.00.

Within the Chapter 13 plan payment, you will be paying back your creditors and the Firm's attorney fees:

- 1. The trustee will be paid an estimated 6% of the plan payment.
- 2. The Firm's fees will be paid at approximately \$165.00/mo.
- 3. IRS will be paid \$800.00 pro rata after the Firm's Fees are paid.
- 4. IDOR will be paid \$300.00 pro rata after the Firm's Fees are paid.
- 5. General Unsecured Creditors will be paid 10% pro-rata after all other creditors.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- A. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- B. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

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## THE SEMRAD LAW FIRM

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THE SEMRAD LAW FIRM LLC

One of its Attorneys

Accepted:

Deborah L Rhyne

Date: 08/04/2018